Approved for use through 7/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

CLAIMS AS FILED - PART (Column 1) SMALL ENTITY OR OR SMALL ENTITY OR OR SMALL ENTITY OR OR SMALL ENTITY OR OR OR OR OR OR OR O	PATENT APPLICATION FEE DETERMINATION RECORD								Application of Docket Number			
FOR NUMBER FILED NUMBER EXTRA. RATE FEE RATE FEE GR SMALL ENTITY OR OR X s = OR X s = OR X s = OR SMALL ENTITY OR OR OR OR OR OR OR O	Substitute for Form PTO-875 16/6/5 996											
BASIC FEE GATE G	T .						SMALL	SMALL ENTITY				
STOTAL CLAIMS STOTAL CLAIM				NUME	BER EXTRA	RATE	FEE		RATE	FEF		
STATE COLUMN CO	(37 CFR 1.16(a))							s	OR.		,	
NOEPENDENT CLAIMS Minus 3 =				minus 2	0 =		X \$ =	1	1	V		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) If the difference in column 1 is less than zero, enter '0' in column 2. CLAIMS AS AMENDED – PART II CLAIMS AS AMENDED – PART II CLAIMS REMAINING AFTER PREVIOUSLY PRESENT PREVIOUSLY PAID FOR AMENDENT PREVIOUSLY PAID FOR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) Total (37 CFR 1.16(d)) CCOlumn 2) (Column 3) CLAIMS REMAINING AMENDMENT PREVIOUSLY PAID FOR			IMS	minus	7 - -		-	 	1 '		 	
### If the difference in column 1 is less than zero, enter '0' in column 2. CLAIMS AS AMENDED - PART II CLAIMS AS AMENDED - PART II CLAIMS REMAINING AFTER PREVIOUSLY PRESENT NUMBER PREVIOUSLY PRESENT FEEL OR AS = OR X S = OR							^ •		OR	X \$=		
CLAIMS AS AMENDED - PART II 3-9+00		·	ENT COMPRESI		(37 CFR 1.16(a))	+5 =	 	OR:	+ \$=	ļ		
Column 1)	* If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL	L	OR:	TOTAL	<u></u>	
Column 1) Column 2) Column 3) SMALL ENTITY SMALL ENTITY	CLAIMS AS AMENDED - PART II											
REMAINING							SMALL ENTITY		OR .			
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Column 1)	¥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	+ 5 =		
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REMAINING			(Column 1)		(Column 2)	(Column 3)		<u>:</u>				
+s = OR +s = TOTAL	ENDMENT		REMAINING AFTER		NUMBER PREVIOUSLY		RATE	TIONAL"		RATE	TIONAL	
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+s = OR +s = TOTAL			•	Minus	•••	=						
TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDIL RATE ADDIL	ΑA	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR) 19(6)										
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI.	1 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3						TOTAL		Ois			
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REMAINING NUMBER PRESENT RATE ADDI. PATE ADDI.						(Column 3)		···		r		
AMENDMENT PAID FOR FEE FEE	AMENDMENT		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	TADNAL		RATE	TIONAL	
Total (37 CFR 1.16(c)) OR (X S = OR (X S =			•	Minus	••	=	x s =		OR	x < =		
Independent		Independent (37 CFR 1 16(b))	•	Minus	***	=			- 1			
1 TINGS FRESILATION OF MOCRIFLE DEPENDENT CDAIM (37 CFR) (6(d))	AR	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR ± 16(d))									··	
TOTAL TOTAL	TOTAL								ŭ,	TOTAL	-	
ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.